

Docket No. MC	
Filed	
Fee No	
CC Approval No	

SECTION I

Applicant Information

Do you now have authority from or an FMCSA? NO YES If yes, identify the le		•	by the form	er ICC, FHWA, OMCS, or
LEGAL BUSINESS NAME				
DOING BUSINESS AS NAME				
BUSINESS ADDRESS				
				()
Street Name and Number C	ity State	Zip Cod	e Telepl	hone Number
MAILING ADDRESS (If different from	om above)			
Street Name and Number		City	State	Zip Code
REPRESENTATIVE (Person who can	n respond to inquir	ies)		
None and title maritime and attended	.:			
Name and title, position, or relationship	np to applicant			
Street Name and Number		City	State	Zip Code
		,		1
Telephone Number ()_		_FAX Nu	mber ()
USDOT Number (If available; if not,				
FORM OF BUSINESS (Check only of				
Corporation State of Incom	*			
Sole Proprietorship Name of Indi				
Partnership Identify Partr	iers			

SECTION II

Type of Authority

You must submit a filing fee of \$300.00 for each type of authority requested (for each box checked).

MOTOR COMMON CARRIER OF PROPERTY (except HOUSEHOLD GOODS)
MOTOR CONTRACT CARRIER OF PROPERTY (except HOUSEHOLD GOODS)

MOTOR COMMON CARRIER OF HOUSEHOLD GOODS

MOTOR CONTRACT CARRIER OF HOUSEHOLD GOODS

BROKER OF PROPERTY (except HOUSEHOLD GOODS)

BROKER OF HOUSEHOLD GOODS

UNITED STATES BASED ENTERPRISE OWNED OR CONTROLLED BY PERSONS OF MEXICO PROVIDING TRUCK SERVICES FOR THE TRANSPORTATION OF INTERNATIONAL CARGO (except HOUSEHOLD GOODS)

UNITED STATES BASED ENTERPRISE OWNED OR CONTROLLED BY PERSONS OF MEXICO PROVIDING TRUCK SERVICES FOR THE TRANSPORTATION OF INTERNATIONAL HOUSEHOLD GOODS

SECTION III

Insurance Information

This section must be completed by ALL motor property carrier applicants. The dollar amounts in parentheses represent the minimum amount of bodily injury and property damage (liability) insurance coverage you must maintain and have on file with the FMCSA.

NOTE: Refer to the instructions for information on cargo insurance filing requirements for motor common carriers and surety bond/trust fund agreement filings for property brokers.

Will operate vehicles having Gross Vehicle Weight Ratings (GVWR) of 10,000 pounds or more to transport:

Non-hazardous commodities (\$750,000).

Hazardous materials referenced in the FMCSA's insurance regulations at 49 CFR 387.9 (\$1,000,000).

Hazardous materials referenced in the FMCSA's insurance regulations at 49 CFR 387.9 (\$5,000,000).

Will operate only vehicles having Gross Vehicle Weight Ratings (GVWR) under 10,000 pounds to transport:

Any quantity of Division 1.1, 1.2, or 1.3 material; any quantity of Division 2.3, Hazard Zone A, or Division 6.1 Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403. (\$5,000,000).

Commodities other than those listed above (\$300,000).

SECTION IV

Safety Certification (Motor Carrier Applicants Only)

APPLICANTS SUBJECT TO FEDERAL MOTOR CARRIER SAFETY REGULATIONS -

If you will operate vehicles of more than 10,000 pounds GVWR and are, thus, subject to pertinent portions of the U.S. DOT's Federal Motor Carrier Safety Regulations at 49 CFR, Chapter 3, Subchapter B (Parts 350-399), you must certify as follows:

Applicant has access to and is familiar with all applicable U.S. DOT regulations relating to the safe operation of commercial vehicles and the safe transportation of hazardous materials and it will comply with these regulations. In so certifying, applicant is verifying that, at a minimum, it:

- (1) Has in place a system and an individual responsible for ensuring overall compliance with Federal Motor Carrier Safety Regulations;
- (2) Can produce a copy of the Federal Motor Carrier Safety Regulations and the Hazardous Materials Transportation Regulations;
- (3) Has in place a driver safety training/orientation program;
- (4) Has prepared and maintains an accident register (49 CFR 390.15);
- (5) Is familiar with DOT regulations governing driver qualifications and has in place a system for overseeing driver qualification requirements (49 CFR Part 391);
- (6) Has in place policies and procedures consistent with DOT regulations governing driving and operational safety of motor vehicles, including drivers' hours of service and vehicle inspection, repair, and maintenance (49 CFR Parts 392, 395 and 396);
- (7) Is familiar with and will have in place on the appropriate effective date, a system for complying with U.S. DOT regulations governing alcohol and controlled substances testing requirements (49 CFR 382 and 49 CFR Part 40).

YES

EXEMPT APPLICANTS - If you will operate only small vehicles (GVWR under 10,000 pounds) and will not transport hazardous materials, you are exempt from Federal Motor Carrier Safety Regulations, and must certify as follows:

Applicant is familiar with and will observe general operational safety guidelines, as well as any applicable State and local laws and requirements relating to the safe operation of commercial motor vehicles and the safe transportation of hazardous materials.

YES

SECTION V

Affiliations

AFFILIATION WITH OTHER FORMER ICC, FHWA OR OMCS, NOW FMCSA-LICENSED ENTITIES . Disclose any relationship you have or have had with any other FMCSA-regulated entity within the past 3 years. For example, this could be through a percentage of stock ownership, a loan, or a management position. If this requirement applies to you, provide the name of the company, MC-number, DOT number, and that company's latest U.S. DOT safety rating. (If you require more space, attach the information to this application form.)

HOUSEHOLD GOODS MOTOR COMMON CARRIER APPLICANTS including United States-based enterprises owned or controlled by persons of Mexico providing truck services for the transportation of international household goods shipments must certify as follows:

Applicant is fit, willing, and able to provide the specialized services necessary to transport household goods. This assessment of fitness includes applicant's general familiarity with former ICC, FHWA, or OMCS now FMCSA regulations for household goods movements and also requires an assurance that applicant has or is willing to acquire the protective equipment and trained operators necessary to perform household goods movements and that applicant will offer arbitration as a means of settling loss and damage disputes on collect-on-delivery shipments. The proposed operations will serve a useful public purpose responsive to a public demand or need.

HOUSEHOLD GOODS MOTOR CONTRACT CARRIER APPLICANTS must certify as follows:

Applicant is fit, willing, and able to provide the specialized services including United States-based enterprises owned or controlled by persons of Mexico providing truck services for the transportation of international household goods shipments necessary to transport household goods. This assessment of fitness includes applicant's general familiarity with former ICC, FHWA, or OMCS, now FMCSA regulations for household goods movements and also requires an assurance that applicant has or is willing to acquire the protective equipment and trained operators necessary to perform household goods movements and that applicant will offer arbitration as a means of settling loss and damage disputes on collect-on-delivery shipments. The proposed service will be consistent with the public interest and the transportation policy of 49 U.S.C. 10101.

HOUSEHOLD GOODS BROKER APPLICANTS must certify as follows:

Applicant is fit, willing, and able to provide household goods brokerage operations and to comply with all pertinent statutory and regulatory requirements. The involved services will be consistent with the public interest and the transportation policy of 49 U.S.C. 10101.

NOTE: Applicant may attach a supporting statement to this application to provide additional information about any of the above certifications. This evidence is optional.

SECTION VII	
	Contracts provide for assignment of one or more vehicle for the exclusive use of each shipper in the manner specified in Interstate Van Lines, Inc. Extentions- Household Goods, 5 I.C.C.2d 168 (1988).
SECTION VIII	This oath applies to all supplemental filings to this application. The signature must be that of applicant, not legal representative.
Applicant's Oath	I,, verify under penalty of Name and title
	perjury, under the laws of the United States of America, that all information supplied on this form or relating to this application is true and correct. Further, I certify that I am qualified and authorized to file this application. I know that willful misstatements or omissions of material facts constitute Federal criminal violations punishable under 18 U.S.C. 1001 by imprisonment up to 5 years and fines up to \$10,000 for each offense. Additionally, these misstatements are punishable as perjury under 18 U.S.C. 1621, which provides for fines up to \$2,000 or imprisonment up to 5 years for each offense.
	I further certify under penalty of perjury, under the laws of the United States, that I have not been convicted, after September 1, 1989, of any Federal or State offense involving the distribution or possession of a controlled substance, or that if I have been so convicted, I am not ineligible to receive Federal benefits, either by court order or operation of law, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988 (21 U.S.C. 862).

Signature _____

Date ___

Fee Policy

Filing fees must be payable to the **Federal Motor Carrier Safety Administration**, by check drawn upon funds deposited in a bank in the United States or money order payable in U.S. currency or by approved credit card.

Separate fees are required **for each type of authority requested**. If applicant requests multiple types of permanent authority on one application form (for example, common and contract carrier authority) or if applicant submits more than one form in the OP-1 Series in a single filing, multiple fees are required. The applicant may submit a single payment for the <u>sum of the applicable fees</u>.

Filing fees must be sent, along with the original and one copy of the application, to Federal Motor Carrier Safety Administration, P. O. Box 70935, Charlotte, NC 28272-0935. **For express mail only**: QLP Wholesale Lockbox-NC0810, Lockbox #70935, 1525 West WT Harris Blvd., Charlotte, NC 28262. **For credit card only**: FMCSA, IT Operations Division, 400 Seventh St., SW, Room 8218, Washington, D.C., 20590.

After an application is received, the filing fee is **not** refundable.

The FMCSA reserves the right to discontinue processing any application for which a check is returned because of insufficient funds. The application will not be processed until the fee is paid in full.

Filing Fee Information

Signature __

show the appropria	at submit a filing fee for each type ate filing fee. The total amount du s for multiple authorities may be	ie is equal to the fee time	es the number of boxes checked
Total number of b	oxes checked in Section II:	x filing fee \$	= \$
INDICATE AMO	UNT \$	AND METHOD	OF PAYMENT
CHECK or	MONEY ORDER, payable	to: FMCSA	
VISA	MASTERCARD		

_____Date ___

Credit Card Number _____ Expiration Date _____